

Title 440 – Conservation Programs Manual

Part 512 – Conservation Program Contracting

Subpart J – Exhibits

512.93 Ineligibility Determination for Conservation Program Contract Letter

VIA CERTIFIED MAIL: RETURN RECEIPT REQUESTED

[Date]

[Name and address of applicant]

Application No: _____

Dear [applicant name]:

This is to advise you that your application for financial assistance through the [insert program] has been determined not to be eligible.

[Include one of the following reasons]

*We have determined that your application does not meet the minimum environmental objectives and criteria established for [insert program] projects in [insert county]. These objectives and the associated evaluation process were established by the State Conservationist based on recommendations from the State Technical Committee. [Add local work group and district conservationist as appropriate.]

*We have determined that your application and the associated practices are not eligible [insert reasons for ineligibility determination].

You may contact this office by calling (_____) _____ to determine whether any adjustments can be made to your application to make it compatible with the objectives of the [insert program]. Your adjusted application may be considered for funding during the next ranking period.

This is a final Natural Resources Conservation Service (NRCS) program decision. As such, you are provided with the following appeal and mediation rights:

If you feel the facts have not been properly considered, you may request the following appeal rights: Appeal to the _____ County FSA Committee, or the National Appeals Division (NAD). You may also request mediation. Please contact the NRCS office if you plan to take any of these actions.

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To request mediation contact:

Mediation Coordinator
Agriculture Mediation Program
[Insert address]
Phone: [Insert phone number]
Fax: [Insert fax number]

To appeal directly to the NAD contact:

Assistant Director
[Insert address]
Phone: [Insert phone number]
Fax: [Insert fax number]

Your written request must be received no later than 30 days from the date that you received this notification and clearly explain the reasons you disagree with the decision in order for it to be considered.

Thank you for your interest in this program. We look forward to assisting you the future.

Sincerely,

[Enter DC name]
District Conservationist

cc:
CED, FSA